

CSSSA Animaton Application—2015

POSTMARK DEADLINE: February 28, 2015

PLEASE TYPE OR PRINT IN BLUE OR BLACK INK ONLY.

1. ANIMATION APPLICATION PORTFOLIO

(If you wish to apply to more than ONE department, you must print and complete the application for that department and submit in a separate envelope.)

Animation Portfolio Required Format:

- USB Flash Drive only accepted file types:
.avi, .mov, .mp4 or .jpg
 Flipbook (please save all electronic files to one media type)

2. STUDENT INFORMATION

Student Legal First Name: _____ Middle Initial: _____

Legal Last Name: _____

Home Address (mailing): _____

City: _____

State: _____ Zip: _____ California County: _____

Country: _____

Email address: _____

Date of Birth (use numbers): ____/____/____.

Age: _____

Gender: () male () female

Grade Level to be completed as of June 2015: _____

Home Phone: (____) _____ - _____

Student Cell Phone: (____) _____ - _____

CSSSA Animation Application—2015

3. PARENT/GUARDIAN INFORMATION

Parent/Guardian First Name: _____

Last Name: _____

Home Phone: (____) _____ - _____

Work Phone: (____) _____ - _____

Parent/Guardian Cell Phone: (____) _____ - _____

Email address: _____

4. SCHOOL INFORMATION

Current School: _____

Phone: (____) _____ - _____

Street Address: _____

City: _____

State: _____ Zip: _____

California County: _____

5. ATTENDANCE VERIFICATION

To verify your attendance at a California secondary school, please submit either a current unofficial transcript of your academic record, or have your teacher or counselor complete the Attendance Verification form (page 9).

6. RECOMMENDATION INFORMATION

Please identify two people who will complete the Recommendation Forms on your behalf. These people should be school teachers, private instructors, or arts professionals in your chosen subject area. Recommendations may be submitted on school stationery if the recommender prefers that, but they **MUST** be enclosed with this application.

CSSSA Animation Application—2015

FIRST RECOMMENDATION:

Name: _____

Position: _____

School (if applicable): _____

School Street Address: _____

City/County: _____

State: _____ Zip: _____ Country (if outside of US): _____

SECOND RECOMMENDATION:

Name: _____

Position: _____

School (if applicable): _____

School Street Address: _____

City/County: _____

State: _____ Zip: _____ Country (if outside of US): _____

7. WHERE DID YOU LEARN ABOUT California State Summer School for the Arts?

Friend Family Internet Poster Teacher School Administration

Local Arts Organization Other (Specify): _____

CSSSA Animation Application—2015

9. DO YOU REQUIRE ANY SPECIAL SERVICES FOR REASON OF A DISABILITY?

Physical:

None

Legally blind/visually impaired

Mobility impairment (including orthopedic)

Other impairment (please specify): _____

Communication:

None

Speech impairment

Hearing impairment

Learning disability

Please describe:

10. ETHNIC INFORMATION This question is voluntary. The California State Summer School for the Arts collects this information to conform to new guidelines from the Federal government. This information will not affect any student's application for admission.

Check one:

Decline to state

American Indian or Alaska Native

Asian

Black or African-American

Hispanic

Native Hawaiian or other Pacific Islander

White

Other _____

CSSSA Animation Application—2015

11. EDUCATIONAL INFORMATION

How many years have you studied your primary art form?

(1) In your school: _____

(2) Private study: _____

Please describe your education plans beyond high school:

If you attended CSSSA previously, please check the year(s) and indicate department(s):

2011 2012 2013 2014 Department(s):

12. FILING INSTRUCTIONS

Mail all forms, the assignments for your department, and the application fee postmarked on or before February 28, 2015 to the Department you are applying to at:

California State Summer School for the Arts

ATTENTION: Animation Department

P.O. Box 1077

Sacramento, CA 95812-1077

- You MUST write the Department you are applying to on the outside of the envelope.
- A non-refundable \$20 APPLICATION FEE is required:

CHECK or MONEY ORDER made payable to "CSSSA"

VISA MasterCard

Card # _____ Expires Mo. _____ Yr. _____

Three digit security number found on back of card: _____

Contact: (916) 229-5160 / (916) 229-5170 (fax) / www.application@csssa.org

CSSSA Animation Application—2015
California State Summer School for the Arts 2015 Program
RECOMMENDATION FORM
POSTMARK DEADLINE: February 28, 2015

To the Student: **YOU NEED TO PRINT AND SUBMIT TWO OF THESE FORMS!**
Two individual adults need to fill out a recommendation form for you. Please make sure that your two recommendations and all other parts of your application, including the Required Assignments, are submitted in the same envelope postmarked on or before February 28, 2015. Your application cannot be completely processed until ALL REQUIRED FORMS AND RECOMMENDATIONS are received. Teachers may submit written recommendations on school stationery, if they prefer.

1. STUDENT INFORMATION

Students please fill in the student information portion of this form before providing it to the individual who will be recommending you.

Student Name: _____

2. RECOMMENDING ADULT: (Teacher, private instructor or other recommending adult).

Name of recommending individual:

Recommender's School Street Address:

City: _____

State: _____ Zip: _____

Email Address: _____

CSSSA Animation Application—2015

Recommender's Phone: (____) _____ - _____

Subject Taught: _____

How many years have you known this student and in what capacity:

Indicate below your evaluation of the applicant:

1. Interest in chosen area:

Below Average Average Above Average Superior

2. Ability in chosen area:

Below Average Average Above Average Superior

3. Character:

Below Average Average Above Average Superior

4. Cooperation:

Below Average Average Above Average Superior

5. Emotional Maturity:

Below Average Average Above Average Superior

6. Personal Initiative:

Below Average Average Above Average Superior

Please attach any additional comments.

Signature: _____ Date: _____

3. Return completed form to student (May be sealed for confidentiality) or mail directly to

CSSSA at:

California State Summer School for the Arts
ATTENTION: Letter of Recommendation
P.O. Box 1077
Sacramento, CA 95812-1077

Contact: (916) 229-5160 / (916) 229-5170 (fax) / www.application@csssa.org

This form should be completed by a parent/guardian. You will need information from your filed 2012 or 2013 income taxes (whichever is most recently filed).

Submit only if you wish to be considered for CSSSA financial assistance. Requesting financial assistance will not affect the outcome of your child's CSSSA application. Financial assistance is restricted to California students only.

POSTMARK DEADLINE: February 28TH.

STUDENT INFORMATION

First Name	Last Name
------------	-----------

PARENT/GUARDIAN INFORMATION

First Name	Last Name		
Mailing Address	City	State	Zip Code
Phone	E-mail	Are you the:	
		<input type="checkbox"/> Parent	<input type="checkbox"/> Guardian

PARENTS ADJUSTED GROSS INCOME (AGI)

Forms: 1040 - Line 37; 1040A - Line 21; 1040EZ - Line 4	\$	
Earned by Father/Guardian	\$	
Earned by Mother/Guardian	\$	

ANNUAL SOCIAL SECURITY OR DISABILITY BENEFITS

Report benefits received by the entire family. Omit educational benefits. Do no report money included in AGI above. \$

NON-TAXABLE INCOME

Include any: <ul style="list-style-type: none"> • Untaxed unemployment compensation • Interest and dividend exclusions • Military, or clergy housing allowances • Untaxed portion of capital gains 	<ul style="list-style-type: none"> • Income from untaxed municipal bonds • Child support • Non-taxable retirement payouts • Non-educational veterans' benefits 	\$	
--	--	----	--

TOTAL \$

Size of Household

Include parents, all dependent children, and other dependents who you claim.

Number of dependents who will be full-time college students in the fall

Un-Reimbursed Medical Expenses

Only report if your amount of un-reimbursed expenses is greater than 7.5% of your AGI above. \$

In order to complete this financial aid application you must submit:

1. A copy of your filed 2012 or 2013 Federal tax forms, please do not include schedules and black out all Social Security Numbers. If you will not file tax forms, please provide appropriate income documentation.
2. A brief paragraph written by parent/guardian describing any extenuating financial circumstances.
3. Documentation verifying Social Security benefits, if applicable.
4. Documentation verifying un-reimbursed medical expenses, if applicable.

I certify that the information reported on this form is accurate to the best of my knowledge.

Parent/Guardian Signature

Date

CSSSA Animation Application—2015
California State Summer School for the Arts 2015 Program
ATTENDANCE VERIFICATION FORM

POSTMARK DEADLINE: February 28, 2015, with completed application

To the Student: YOU NEED TO PRINT AND SUBMIT THIS FORM, or a transcript.

- A teacher or counselor from your high school must fill out this form for you.
- Please make sure that this form and all other parts of the application are submitted without delay. Your application cannot be completely processed until ALL required forms are received by the California State Summer School for the Arts.

ATTENDANCE VERIFICATION: To verify your attendance at a secondary school, please submit either a current transcript of your academic record, or have your teacher or counselor complete the following certification:

I certify that _____ (student)

submitting this application is a bona fide student at:

_____ school.

Teacher/Counselor Name: _____

Position: _____

Signature: _____ Date: _____

Mail* this form along with your application and materials by February 28, 2015 to:

California State Summer School for the Arts
Attention: Animation Department
P.O. Box 1077
Sacramento, CA 95812-1077

* You MUST write the name of the Department to which you are applying to on the outside of the envelope.

Contact: (916) 229-5160 / (916) 229-5170 (fax) / www.application@csssa.org

CSSSA Animation Application—2015

Students do not need prior formal training in animation to apply to the Animation Program.

Applicants must submit completed application and teacher recommendation forms, and ALL of the following REQUIRED ASSIGNMENTS. If you fail to include any of the required assignments, your application will be deemed incomplete and disqualified from further review:

- A. One drawing or painting that shows what you feel is unique about yourself.
- B. One drawing or painting of any subject that interests you. You might consider an emotion, memory, song, place or thing. Provide an explanation of the work on a separate sheet of paper, and include the poem, or lyrics if appropriate.
- C. One drawing or painting that you feel demonstrates your technical skills.

*Format for Assignments A, B and C: all must be submitted on a USB flash drive using .jpg format **only**. The flash drive must be clearly labeled with your name and date of birth. Please save your assignments with your first initial and last name followed by the appropriate letter for each of the submissions. For example, John Smith would label his work as follows:*

jsmith_A.jpg
jsmith_B.jpg
jsmith_C.jpg

- D. Either a flipbook that has at least 25 pages, or a video on a flash drive, of an animation you have created that demonstrates your understanding of motion.

ACCEPTABLE file formats for video submission: **.avi**, **.mov** or **.mp4**. Please do not include files in a format that is native to the program you are using to edit video (if applicable). Auditions submitted on any format other than those outlined above will **NOT** be reviewed.

- E. Two typed statements of no more than 150 words each addressing the following topics:

1. The CSSSA Animation program requires each student to complete 8 difficult projects in only 4 weeks. Give us an example of something you have done before in school or in your life that required you to work very hard, and tell us how you did on that task or group of tasks.
2. Why are you interested in animation?

CSSSA Animation Application—2015

RETURNING STUDENTS ONLY:

Applicants who attended the Animation Program previously must include a typed statement of no more than 150 words explaining what you hope to achieve during your second summer at CSSSA if you are accepted. This statement will be accepted instead of Assignment E Topic 1 above. Also note: Assignments A through D must be new submissions that show your DEVELOPMENT and GROWTH AS AN ARTIST since you attended the program. Do not submit work you created at a previous session or your application will be disqualified. If you previously attended CSSSA in an artistic discipline other than Animation, you must submit a recommendation from a CSSSA instructor in that department.

***** NOTE TO ALL ANIMATION PROGRAM APPLICANTS:

VERY IMPORTANT: The review committee insists that all work is presented with the utmost care and attention. The artwork / animation you submit should be original and from your own experience and imagination. The committee wants to see YOU reflected in the content and distinctive style of your artwork. Be yourself! **There should be no copying of existing cartoon characters.** We also discourage the submission of standard animation exercises such as the bouncing ball and flour sack. The applicant is highly encouraged to include submissions that explore a wide range of fine arts styles and ideas other than cartoon art.

DO NOT SEND YOUR ORIGINAL ARTWORKS. They will not be considered.

If you submit an original flipbook and would like it returned, you must include a self-addressed, stamped shipping envelope or box with your application. The California State Summer School for the Arts DOES NOT assume responsibility for the loss or damage of any materials submitted.

Send your application and assignments to:

California State Summer School for the Arts
Attention: Animation Department
P.O. Box 1077
Sacramento, CA 95812-1077